

American Red Cross

CPR RECERTIFICATION CHALLENGE COURSE

FOR THE PROFESSIONAL RESCUER

2016

AT FREEDOM PARK

Name: _____ Age: _____

Phone: _____ E-Mail: _____

Address: _____

Amount Paid: \$ _____ Date: _____

You are registered once we process your payment. Space is limited. We will contact you only if there is a problem.

Class Schedule:

Tuesday, 5/24/16 6:00-9:00 p.m.

Participants must bring their own pocket CPR mask. You may purchase one for \$15 at the Recreation office or on the 1st night of class.

Instructor: Tom Bubel (*Registration is limited*)

Fee: \$65.00 (Cancellation Fee \$15)

Please make check payable to: Town of LaGrange

RETURN BY: 5/20/16 TO: LaGrange Recreation Department
120 Stringham Road
LaGrangeville, NY 12540

For more information call: Sharon Beale, Rec. Dept. at 452-1972